

Coordinating **TRICARE with Other Health Insurance**

A quick
reference guide





*Please provide feedback on this brochure at:
<http://www.tricare.osd.mil/evaluations/brochures>*

An Important Note About TRICARE Program Changes

At the time of printing, the information in this brochure is current. It is important to remember that TRICARE policies and benefits are governed by public law. Changes to TRICARE programs are continuous, and new benefits are added regularly as we continue to make TRICARE a better program for you. For the most recent information, visit www.tricare.osd.mil.

Other Health Insurance

Any other health insurance (OHI) plan you have in addition to your TRICARE coverage is considered to be your primary health insurance. OHI is considered any non-TRICARE health insurance you receive through an employer or other public or private insurance program, including government programs such as Medicare.

If you have OHI:

- *Tell your provider and regional contractor.*
- *Fill out the OHI form located in the TRICARE Choices booklet or on your regional contractor's Web site.*

Keeping your regional contractor informed about your OHI will allow TRICARE to better coordinate your benefits and will help ensure that there is no delay in payment of claims.

How TRICARE Works with Other Health Insurance

Federal law requires that TRICARE is the secondary payer to OHI, except for Medicaid, TRICARE supplements, the Indian Health Service, and other programs/plans as identified by the TRICARE Management Activity.

When you have double coverage, the primary insurer pays its benefits in full as the first payer. After the primary insurer pays, TRICARE will pay what is left up to the TRICARE allowable charge, which is the maximum amount TRICARE will authorize for medical and other services furnished in an inpatient or outpatient setting. There is no change in benefit limits when TRICARE is the secondary payer. Payments, from the primary payer and TRICARE as secondary payer, will not collectively exceed the TRICARE allowable charge.

If you have OHI, you must follow any rules and guidelines set forth by your OHI plan, but you are not required to obtain referrals or prior authorizations from TRICARE for TRICARE-covered services, except for:

- Adjunctive dental care
- The Program for Persons with Disabilities
- Stem cell and organ transplants
- Nonemergency inpatient behavioral health care services*

Be sure to submit all claims to TRICARE because deductibles may be applied to your annual catastrophic cap. Your provider may submit secondary claims for you.

** Beneficiaries using Medicare as the primary payer do not require referrals or prior authorization for inpatient behavioral health care. When Medicare benefits have been exhausted, prior authorization will be required under TRICARE.*

If you are submitting a secondary claim, you must use the DD Claim Form 2642 (may be downloaded from your regional contractor's Web site or from www.tricare.osd.mil/claims) and attach the provider's bill.

Send your DD Form 2642, all itemized bills, and a copy of your OHI explanation of benefits to your regional contractor.



Types of Other Health Insurance



TRICARE and Medicare

When you receive medical care under Medicare, your provider files the claim with Medicare. Medicare then processes the claim and forwards the claim to TRICARE for payment of the remaining amount. TRICARE automatically sends payment to your provider. You receive an explanation of benefits (EOB) from TRICARE indicating the amount Medicare and TRICARE paid.

TRICARE and Medicare Covered Services

In most cases, Medicare pays first and TRICARE pays its share of the remaining expenses second.

Services Covered by TRICARE, but not by Medicare

TRICARE is the only payer, and you are responsible for TRICARE deductibles and cost-shares.

Services Covered by Medicare, but not by TRICARE

Medicare is the only payer, and you are responsible for Medicare deductibles and cost-shares.

Services not Covered by Medicare or TRICARE

You are responsible for all costs.

If you also have a Medicare supplement, it will pay before TRICARE, making TRICARE the third payer.

TRICARE Supplemental Insurance

If you have supplemental insurance that pays your out-of-pocket expenses, you may be responsible for submitting your claims to them. Consult your supplemental insurance plan for coverage guidelines.

Be sure to ask your provider for a receipt for any copayment you make. Your supplemental insurance company may require a copy of receipts for payment.

If your only other insurance is a TRICARE supplement, you are not required to complete the OHI form.

TRICARE and Third Party Liability Insurance

The Federal Medical Recovery Act allows TRICARE to be reimbursed for its costs of treating you if you are injured in an accident that was caused by someone else. The DD Form 2527 Statement of Personal Injury Third Party Liability Form will be sent to you if a claim is received that appears to have third party liability involvement. Within 35 calendar days, you must complete and sign this form and follow the directions for returning the form to the appropriate claims processor. The DD Form 2527 is available on your regional contractor's Web site or at www.tricare.osd.mil/claims.

Filing Claims with Other Health Insurance

Health Care Claims

For more information on filing medical claims:

- Visit your regional contractor's Web site.
- Visit www.tricare.osd.mil/claims.
- Refer to the *Guiding the Claims Process* pamphlet found at your TRICARE Service Center (TSC). This pamphlet explains how to file a medical claim, an appeal, a grievance, or report suspected fraud and abuse.
- Your *TRICARE Beneficiary Handbook* also provides information to assist you in filing a TRICARE claim.

Pharmacy Claims

When you have OHI that includes pharmacy coverage, TRICARE is always the secondary payer.

With OHI as first payer, you pay your OHI copayment (or deductible, if applicable) and then may seek reimbursement from TRICARE for your out-of-pocket expenses. To seek reimbursement, submit a statement from your OHI or explanation of benefits along with a TRICARE claim form (DD Claim Form 2642) and required receipts.



For prescriptions filled at a retail pharmacy prior to June 1, 2004, submit your claim to your regional contractor's claims processor. After June 1, 2004, submit your claim to the TRICARE retail pharmacy contractor, Express Scripts, Inc.

If the medication is not covered under your OHI but covered under TRICARE, you may be required to pay for the prescription in full and seek reimbursement from TRICARE, as explained above, and include a statement of denied coverage by your OHI. If the medication is covered by TRICARE, you will receive reimbursement for your out-of-pocket expenses after TRICARE cost-shares and deductibles are applied.

Claims for prescriptions received overseas must be filed with the overseas claims processor.

For additional information, visit www.tricare.osd.mil/overseas or call 1-888-777-8343. The TRICARE Mail Order Pharmacy (TMOP) service is not available to those who have pharmacy benefits through OHI (unless the medication is not covered by your OHI or you have exceeded that plan's coverage limits).

For information on filing pharmacy claims, please visit www.express-scripts.com/TRICARE or refer to the *TRICARE Retail Pharmacy Benefit Guide* found at your local TSC. This brochure contains a DD 2642 claim form and provides the addresses needed to file your claim. The telephone numbers for TMOP and the TRICARE Retail Pharmacy Program are located on the back of this pamphlet.

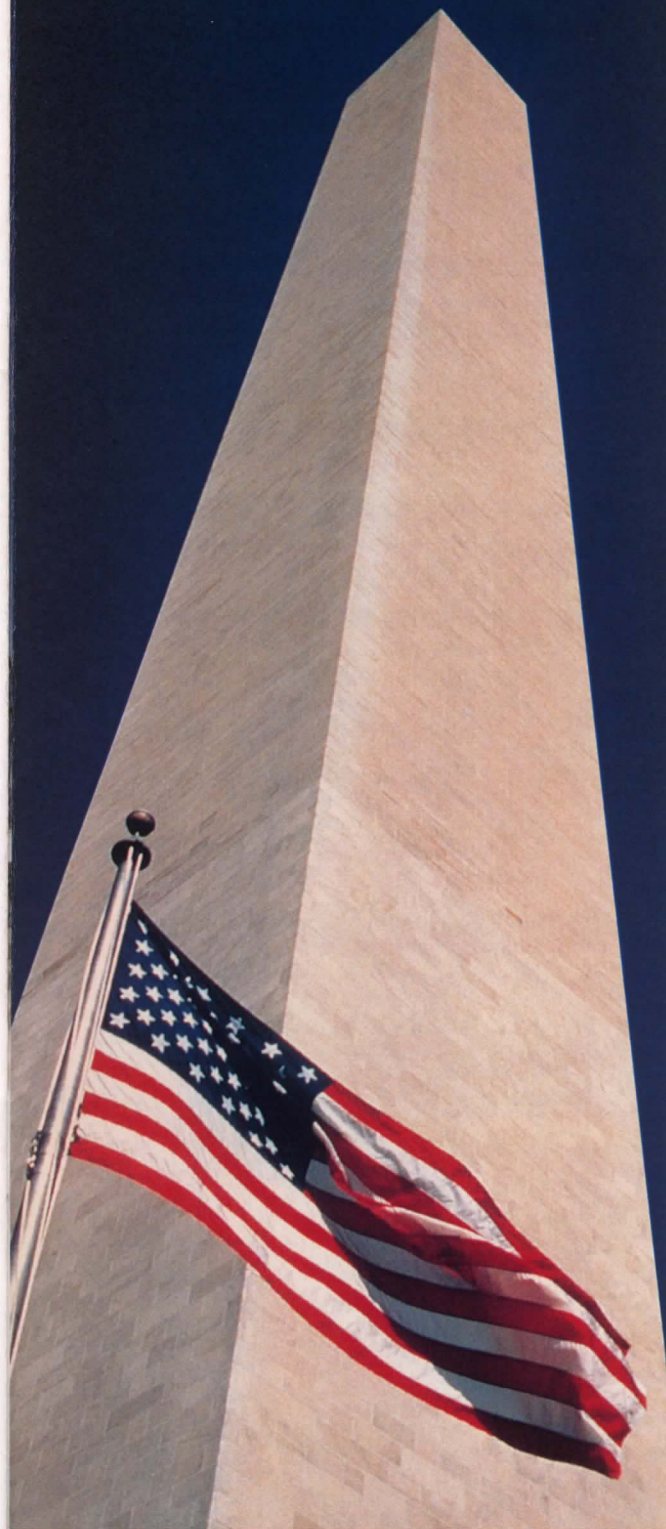
Canceling Your Other Health Insurance (OHI)

If you are considering canceling your OHI, you should be aware of the following:

- You may not be able to re-enroll in your current health insurance until a future open enrollment period.
- You may lose other benefits associated with the health insurance, such as long-term disability insurance, group life insurance, or dental and vision benefits.

Be sure to contact your OHI administrator to get more information. If you cancel your OHI, you must submit a notification in writing to your regional contractor that you have canceled your OHI.

If you have questions regarding how TRICARE works with OHI, call your regional contractor at the number on the back of this pamphlet.



For Information and Assistance

TRICARE North Region Contractor

1-877-TRICARE (1-877-874-2273)
www.healthnetfederalservices.com

TRICARE South Region Contractor

1-800-444-5445
www.humana-military.com

TRICARE West Region Contractor

1-888-TRIWEST (1-888-874-9378)
www.triwest.com

TRICARE Overseas

(TRICARE Europe, TRICARE Latin America
and Canada, and TRICARE Pacific)
1-888-777-8343
www.tricare.osd.mil/overseas

DEERS—Verify Eligibility

1-800-538-9552
www.tricare.osd.mil/deers

TRICARE Mail Order Pharmacy Program

1-866-DoD-TMOP (1-866-363-8667)
www.express-scripts.com/TRICARE

TRICARE Retail Pharmacy Program

1-866-DoD-TRRx (1-866-363-8779)
www.tricare.osd.mil/pharmacy

TRICARE Dental Program

1-800-866-8499
www.ucci.com

TRICARE Retiree Dental Program

1-888-838-8737
www.trdp.org

TRICARE Information Service

1-888-DoD-CARE (1-888-363-2273)
www.tricare.osd.mil

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TRICARE Worldwide Coverage

